PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

PR ESU 6-0027

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
	<u> </u>	· -	(Column 1)		(Column 2)		TYPE	TYPE		OR			
TOTAL CLAIMS			20			3			FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC F	EE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			2_0 minus 20=		*		X\$ 9=	-		OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 =		*	*				OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT							+135=	-		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	TOTA			OR	TOTAL	710	
CLAIMS AS AMENDED - PART II											OTHER	THÁN	
	(Column 1) (Column 2) (Column 3)								SMALL ENTITY OR SMALL ENTITY				
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=	=		OR	X\$18=	r.	
	Independent	*	Minus	***	-	=	X40=			OR	X80=		
	FIRST PRESE	NTATION OF MI	ULTIPLE DEI	PENDEN	CLAIM		+135=			OR	+270=		
							TOT				TOTAL		
								EE		OR	ADDIT. FEE		
15.	· · · · · · · · · · · · · · · · · · ·	(Column 1) CLAIMS		(Colu	mn 2) HEST	(Column 3)					· · · · · · · · · · · · · · · · · · ·		
AMENDMENT B		REMAINING AFTER AMENDMENT	_	NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=	=		OR	X\$18=	٠-١, ·	
	Independent	*	Minus	***		=	X40=			OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1					
· •							+135=		ė.	OR	+270=		
								AL EE		OR	TOTAL ADDIT. FEE	¥	
		(Column 1)		(Colu	mn 2)	(Column 3)					*		
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		<u> </u>	OR	X\$18=	<u> </u>	
	Independent	*	Minus	***		=	X40=	4			X80=		
⋖	FIRST PRESENTATION OF M		ULTIPLE DEPENDEN		T CLAIM		A40=	-		OR			
	•	+135=	:		OR	+270=							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		ımber Previously P nber Previously Pa							ropriate box				